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SECRETARY OF STATE
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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: AC Leasing, LLC (Name of Limited Liability Company)				
Dear Sir or Madam:				
The enclosed Resignation of Member, Managing M	Member or Manager and fee(s) are submitted for filing.			
Please return all correspondence concerning this m	natter to the following:			
Michael F. Aranda				
(Name of Person)				
E.H. Building Group				
(Firm/Company)				
4227 Northlake Blvd.	·			
(Address)				
Palm Beach Gardens, FL 33	3410			
(City/State and Zip Code)	,			
For further information concerning this matter, ple	ase call:			
Michael F. Aranda	at (_ 561) 626-6121			
(Name of Person)	(Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314			
Enclosed is a check for the following amount:				
\$25 Filing Fee CR2E079 (8/05)	\$55 Filing Fee & Certified Copy			



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	Michael F. Aranda	, hereby resign as	Member/Manager
		, , , , , , , , , , , , , , , , , , ,	(Title)
of	AC Le	easing, LLC	
	(Limited I	Liability Company)	
a limited li	ability company organized under the	ne laws of the State of	Florida
and affirm	that the limited liability company h	nas been notified in writin	g of the resignation.
	(Signature of resigning mana	ger, managing member or	r member)

FILING FEE IS \$25.00

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314